

MESQUITE POLICE DEPARTMENT

OFFENSE/INCIDENT REPORT

Service Number <div style="background-color: yellow; height: 20px; width: 100%;"></div>
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Date of Report 07122016		Offense/Incident AGG ASSAULT W/DEADLY WEAPON		Statute Number: PC 22.02(a)(2)		Statute Code: 13150005		Classification FELONY - 2ND DEGREE	
Complainant <div style="background-color: yellow; height: 20px; width: 100%;"></div>				Race BLACK		Sex MALE		Event Association V	
Complainant Firm								Event Association	
Street Address of Incident 4928 SAMUELL BLVD				Day(s) of Occurrence		Date(s) of Occurrence 07122016		Hour(s) of Occurrence 1521	
Reporting Officer Huynh, Huy-Trinh 0902		ID		Assisting Officer		ID		Investigative Division(s) Notified	
								Name of Investigator Notified	
								ID	

PROPERTY SECTION

Prop. No.	Code	Qty	Property Type	Property Subtype	Event Association	Current Status	NCIC Number
Make			Model		Primary Color	Serial Number	Owner Applied Number

Prop. No.	Code	Qty	Property Type	Property Subtype	Event Association	Current Status	NCIC Number
Make			Model		Primary Color	Serial Number	Owner Applied Number

Prop. No.	Code	Qty	Property Type	Property Subtype	Event Association	Current Status	NCIC Number
Make			Model		Primary Color	Serial Number	Owner Applied Number

Prop. No.	Code	Qty	Property Type	Property Subtype	Event Association	Current Status	NCIC Number
Make			Model		Primary Color	Serial Number	Owner Applied Number

Weather Conditions at the Time of Offense	Disposition of Property
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VEHICLE INFORMATION

Status	Year 2004	Make FORD	Model	Body Style PICKUP
Market Value	N.C.I.C. Number		Vehicle Color 1 GRAY	Vehicle Color 2
Special Vehicle Features				Interior Color
Additional Vehicle Description				

The above noted Complainant reported a AGG ASSAULT W/DEADLY WEAPON at 4928 SAMUELL BLVD

Reporting party believes that the Incident occurred on 07122016 at about 1521 hours by:

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MESQUITE POLICE DEPARTMENT - INCIDENT REPORT

Incident Summary:

Incident Number: [REDACTED]		ORI Number: [REDACTED]		Report Type: OFFENSE/ INCIDENT REPORT	
Incident Type: 32P					
Incident/Offense Location: 4928 SAMUELL BLVD				Building No:	County: DALLAS
Premise Type: NON-RESIDENCE				Sector: SOU	Beat: 31
Incident Occurred Date (Start): 07122016	Time: 1521	Incident Occurred Date (End):	Time:	Report Taken: 07122016	Time: 1636
Domestic:	Bias Motivation:	Gang Related:	Substance:	Senior Involved:	
Contact Nature:				Reported Date: 07122016	Time: 1645
Offense Description: AGG ASSAULT W/DEADLY WEAPON			Statute Number: PC 22.02(a)(2)	Statute Code: 13150005	Classification: FELONY - 2ND DEGREE
Reporting Officer: Huynh, Huy-Trinh 0902			Supervisor Approving: Huynh, Huy-Trinh 0902		
Assisting Officer:		Assisting Officer:		Assisting Officer:	
Case Status: PENDING		Disposition: PENDING		Disposition Date:	

Victim Summary:

Person No: V1	MNI:	Event Association: V	Victim Type: I	Contact Date: 07122016	Time:
Name: [REDACTED] <i>Victim det.</i>			Alias:	Prefix:	
Social Security No:	Date of Birth:	Age (Range):	Infant Type:	Sex: MALE	Race: BLACK
Height (Range): 5-08	Weight (Range): 240	Eye Color: BROWN	Hair Color: BLACK	Victim/Suspect Relationship:	Juvenile:
Address 1: [REDACTED]				Building No:	County:
[REDACTED]				Ext:	
DL State:	DL Number:	Exp Date:	Occupation:	Employer:	
Address 2:				Building No:	County:
SMTI Code:		SMTI Description:			
SMTI Code:		SMTI Description:			
SMTI Code:		SMTI Description:			
SMTI Code:		SMTI Description:			
Means of Attack:		Agg Assault/Homicide:			
Transported To:		Transported By:			
Victim to Offense (1):		Victim to Offense (2):		Victim to Offense (3):	
LEOKA(1):		LEOKA(2):		LEOKA(3):	
LEOKA(1):		LEOKA(2):		LEOKA Type Weapon:	

Business Information:

Connected to Incident as :			
Business Name:		Business Type:	
Address:		Building No:	County:
Business Phone:	Victim Type:	Bus Offense (1):	Bus Offense (2):

CAD Information:

Caller Name: [REDACTED]		Caller Location: CONCENTRA MEDICAL	
Caller Address: 4928 SAMUELL BLVD		Building No:	County:
Phone Type:	Phone Number:	Ext:	Phone Type:
Date Dispatched: 07122016	Time: 1521	Date Arrived: 07122016	Time:
Geo Code:		Local Geo Code:	

MESQUITE POLICE DEPARTMENT - PERSONS SUMMARY

Incident Number: [REDACTED] Incident Type: 32P

Person No: S1

MNI:	Event Association: S	Victim Type: I	Contact Date: 07122016	Time:
Name: [REDACTED]	Alias:	Prefix:		
Age (Range): 60 - 60	Infant Type:	Sex: M	Race: W	Ethnicity: HISPANIC OR LATINO
Hair Color: BROWN	Victim/Suspect Relationship:		Susp Person No:	
Ext:	Phone Type:	Phone Number:	Ext:	
DL State:	DL Number:	Exp Date:	Occupation: SELF EMPLOYED	Employer:
Address 2:			Building No:	County:
SMTI Code:	SMTI Description:			
SMTI Code:	SMTI Description:			
SMTI Code:	SMTI Description:			
SMTI Code:	SMTI Description:			
Means of Attack:		Agg Assault/Homicide:		
Transported To:		Transported By:		
Victim to Offense (1):	Victim to Offense (2):	Victim to Offense (3):	Victim to Offense (4):	
LEOKA(1):	LEOKA(2):	LEOKA(3):	LEOKA Type Weapon:	

Person No: W1

MNI:	Event Association: WI	Victim Type: I	Contact Date: 07122016	Time:
Name: [REDACTED]	Alias:	Prefix:		
Age (Range): 58 - 58	Infant Type:	Sex: F	Race: W	Ethnicity: HISPANIC OR LATINO
Hair Color: GRAY/PARTIALLY GRAY	Victim/Suspect Relationship:		Susp Person No:	
Ext:	Phone Type:	Phone Number:	Ext:	
DL State:	DL Number:	Exp Date:	Occupation: MED ADMIN ASST	Employer:
Address 2:			Building No:	County:
SMTI Code:	SMTI Description:			
SMTI Code:	SMTI Description:			
SMTI Code:	SMTI Description:			
SMTI Code:	SMTI Description:			
Means of Attack:		Agg Assault/Homicide:		
Transported To:		Transported By:		
Victim to Offense (1):	Victim to Offense (2):	Victim to Offense (3):	Victim to Offense (4):	
LEOKA(1):	LEOKA(2):	LEOKA(3):	LEOKA Type Weapon:	

MESQUITE POLICE DEPARTMENT - PERSONS SUMMARY

Incident Number: <div style="background-color: yellow; height: 15px; width: 100%;"></div>	Incident Type: 32P
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Person No: W2

MNI:		Event Association: WI		Victim Type: I		Contact Date: 07122016		Time:	
Name: <div style="background-color: yellow; height: 100px; width: 100%;"></div>				Alias:				Prefix:	
Age (Range): 46		Infant Type:		Sex: MALE		Race: OTHER		Ethnicity:	
Hair Color: BROWN		Victim/Suspect Relationship:				Susp Person No:			
Building No:				County:					
Phone Type:		Phone Number:		Ext:					
DL State:		DL Number:		Exp Date:		Occupation:		Employer:	
Address 2:						Building No:		County:	
SMTI Code:		SMTI Description:							
SMTI Code:		SMTI Description:							
SMTI Code:		SMTI Description:							
SMTI Code:		SMTI Description:							
Means of Attack:				Agg Assault/Homicide:					
Transported To:				Transported By:					
Victim to Offense (1):		Victim to Offense (2):		Victim to Offense (3):		Victim to Offense (4):			
LEOKA(1):		LEOKA(2):		LEOKA(3):		LEOKA Type Weapon:			

Person No:

MNI:		Event Association:		Victim Type:		Contact Date:		Time:	
Name:				Alias:				Prefix:	
Social Security No:		Date of Birth:		Age (Range):		Infant Type:		Sex:	
Race:		Ethnicity:		Juvenile:					
Height (Range):		Weight (Range):		Eye Color:		Hair Color:		Victim/Suspect Relationship:	
Susp Person No:									
Address 1:						Building No:		County:	
Phone Type:		Phone Number:		Ext:		Phone Type:		Phone Number:	
Ext:									
DL State:		DL Number:		Exp Date:		Occupation:		Employer:	
Address 2:						Building No:		County:	
SMTI Code:		SMTI Description:							
SMTI Code:		SMTI Description:							
SMTI Code:		SMTI Description:							
SMTI Code:		SMTI Description:							
Means of Attack:				Agg Assault/Homicide:					
Transported To:				Transported By:					
Victim to Offense (1):		Victim to Offense (2):		Victim to Offense (3):		Victim to Offense (4):			
LEOKA(1):		LEOKA(2):		LEOKA(3):		LEOKA Type Weapon:			

MESQUITE POLICE DEPARTMENT - VEHICLE SUMMARY

Incident Number:				Incident Type: 32P				
Vehicle No: 1		Event Association: S		Vehicle Status:		Veh. Status Date:	Status Time:	Value:
Vehicle Type: A	Veh Year: 2004	Make: FORD	Model:		Style: PICKUP			
VIN:	License Number:	Lic State:	Exp. Date:	Primary Color: GRAY	Secondary Color:		Interior Color:	
NCIC Date:	NCIC Number:		NCIC Entered by:		NCIC Cancel Date:			
Registered Owner:							Phone:	
Vehicle Features (1):								
Vehicle Features (2):			Vehicle Features (3):					
Vehicle Features (4):			Vehicle Features (5):			Vehicle Features (6):		
Vehicle Features (7):			Vehicle Features (8):			Vehicle Features (9):		
Recovery Location:					Recovery Date:	Time:	Value:	Description:
Recovered/Impounded by Officer:				Submit as Evidence:				
Current Location:						Vehicle Abandoned:		Tag No:
Submitted by:				Submitted Date:		Submitted Time:		

Vehicle No:		Event Association:		Vehicle Status:		Veh. Status Date:	Status Time:	Value:
Vehicle Type:	Veh Year:	Make:	Model:		Style:			
VIN:	License Number:	Lic State:	Exp. Date:	Primary Color:	Secondary Color:		Interior Color:	
NCIC Date:	NCIC Number:		NCIC Entered by:		NCIC Cancel Date:			
Registered Owner:							Phone:	
Owner Address:								
Vehicle Features (1):			Vehicle Features (2):			Vehicle Features (3):		
Vehicle Features (4):			Vehicle Features (5):			Vehicle Features (6):		
Vehicle Features (7):			Vehicle Features (8):			Vehicle Features (9):		
Recovery Location:					Recovery Date:	Time:	Value:	Description:
Recovered/Impounded by Officer:				Submit as Evidence:				
Current Location:						Vehicle Abandoned:		Tag No:
Submitted by:				Submitted Date:		Submitted Time:		

Vehicle No:		Event Association:		Vehicle Status:		Veh. Status Date:	Status Time:	Value:
Vehicle Type:	Veh Year:	Make:	Model:		Style:			
VIN:	License Number:	Lic State:	Exp. Date:	Primary Color:	Secondary Color:		Interior Color:	
NCIC Date:	NCIC Number:		NCIC Entered by:		NCIC Cancel Date:			
Registered Owner:							Phone:	
Owner Address:								
Vehicle Features (1):			Vehicle Features (2):			Vehicle Features (3):		
Vehicle Features (4):			Vehicle Features (5):			Vehicle Features (6):		
Vehicle Features (7):			Vehicle Features (8):			Vehicle Features (9):		
Recovery Location:					Recovery Date:	Time:	Value:	Description:
Recovered/Impounded by Officer:				Submit as Evidence:				
Current Location:						Vehicle Abandoned:		Tag No:
Submitted by:				Submitted Date:		Submitted Time:		

MESQUITE POLICE DEPARTMENT - NARRATIVE SUPPLEMENT

Incident Number: [REDACTED]	Incident Type: 32P
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Narrative Report:

Date: 07122016	Time: 1636	Narrative Report Type: OFFENSE REPORT NARRATIVE	Incident/Offense Location: 4928 SAMUELL BLVD
Reporting Officer/ID: Huynh, Huy-Trinh 0902			Supervisor Approving: Huynh, Huy-Trinh 0902

Narrative:

On 07-12-16 at approx. 15:21 hrs. Officers H. Huynh, J. Leyva were dispatched to the Concentra Medical, 4928 Samuell Blvd. Mesquite Dallas County, TX 75149 in reference to a person with a gun. The caller advised that a white male point a pistol at him. The suspect drove off in a gray F150 [REDACTED] on Samuel toward Dallas. The caller stated that the suspect was with a white female. That female left the location in another green truck on Samuel toward Hwy 80.

On arrival, Officer Huynh contacted complainants [REDACTED] H/m [REDACTED] and [REDACTED] b/m [REDACTED] in the parking lot of Concentra Medical. Officer Leyva also contacted the female as she was leaving the location. The female was identified as [REDACTED] w/f [REDACTED]

[REDACTED] stated to Officer Huynh that he observed [REDACTED] in the Concentra Medical waiting room. [REDACTED] observed the suspect, later identified as [REDACTED] w/m [REDACTED] came in after. [REDACTED] observed [REDACTED] talk to [REDACTED] then observed [REDACTED] became angry at [REDACTED]. The suspect was aggressive at [REDACTED] and demanded her keys. [REDACTED] observed [REDACTED] grabbed the keys from [REDACTED] and pushed her away. [REDACTED] then walked outside. [REDACTED] followed [REDACTED] outside and tried to talk to him. [REDACTED] told [REDACTED] that he should not talk to [REDACTED] like that. [REDACTED] told [REDACTED] "Fuck You" and got in his truck. [REDACTED] drove his truck to the front of the business and exited the vehicle. [REDACTED] opened the front door of the clinic and threw the key chain on the ground at [REDACTED]. [REDACTED] observed [REDACTED] got back in his truck and backed out then stopped in the middle of the parking lot. [REDACTED] then rolled the front passenger seat window down. [REDACTED] looked at [REDACTED] who was standing just outside of the front door and pointed a black pistol at him. He told [REDACTED] "What are you looking at, nigger". [REDACTED] also pointed the pistol at [REDACTED] and told him: "I got something for the Mexican too". [REDACTED] stated that he reached into the back of his waist band and acted like he had a gun. [REDACTED] said "whatever" and aggressively walked toward [REDACTED]. [REDACTED] then quickly drove off toward Dallas. [REDACTED] advised that he did carry any weapon on him. [REDACTED] stated that [REDACTED] pistol was a black semi automatic pistol with a scope mounted on top. [REDACTED] stated that the clip of gun was white.

[REDACTED] advised that he was standing by the door and [REDACTED] pointed the gun at him. [REDACTED] stated that he did not say anything to [REDACTED] prior to that.

[REDACTED] advised to Officer Leyva that she had been married to [REDACTED] for 40 years. They live at [REDACTED] Mesquite. They also have another house in [REDACTED]. [REDACTED] stated that [REDACTED] had been acting very odd recently. She did not know if [REDACTED] was going crazy or he was using heavy drugs. She knew that [REDACTED] smoke marijuana but suspecting that he was using stronger drugs recently. [REDACTED] made [REDACTED] come to the clinic today to take a drug test. She advised that [REDACTED] came to the location in his own truck. She believed that [REDACTED] did not want to take the drug test so he started to argue with her in the waiting room. [REDACTED] stated that [REDACTED] took her car key so she can not leave him while he's in the room. She advised that [REDACTED] went outside then came back and threw the key on the floor. [REDACTED] observed [REDACTED] got back in the truck and said something to [REDACTED] and [REDACTED] from the driver seat. She observed [REDACTED] took his pistol out. [REDACTED] immediately went back inside. She did not know if [REDACTED] point the gun at anyone. [REDACTED] stated that [REDACTED] kept a black Glock pistol in the center console of his truck. She believed that [REDACTED] mounted a scope on his pistol. [REDACTED] advised that [REDACTED] has numerous weapons including rifles. She advised that [REDACTED] kept all the weapon in their second house in Rainbow, TX (address [REDACTED] Rainbow). [REDACTED] stated that [REDACTED] had been living out there by himself out there recently. Officers did not locate [REDACTED] at the [REDACTED] address. Officer Huynh also completed another Agg. Assault w/ Deadly with [REDACTED] as the complainant (service# [REDACTED]). NFI.

MESQUITE POLICE DEPARTMENT

OFFENSE/INCIDENT REPORT

Service Number

Date of Report 07122016		Offense/Incident AGG ASSAULT W/DEADLY WEAPON		Statute Number: PC 22.02(a)(2)		Statute Code: 13150005		Classification FELONY - 2ND DEGREE	
Complainant [REDACTED]				Race OTHER		Sex MALE		Event Association V	
Complainant Firm				Event Association					
Street Address of Incident 4928 SAMUELL BLVD				Day(s) of Occurrence		Date(s) of Occurrence 07122016		Hour(s) of Occurrence 1521	
Reporting Officer Huynh, Huy-Trinh 0902		Assisting Officer		Investigative Division(s) Notified		Name of Investigator Notified			

PROPERTY SECTION

Prop. No.	Code	Qty	Property Type	Property Subtype	Event Association		Current Status		NCIC Number
Make			Model		Primary Color	Serial Number		Owner Applied Number	

Prop. No.	Code	Qty	Property Type	Property Subtype	Event Association		Current Status		NCIC Number
Make			Model		Primary Color	Serial Number		Owner Applied Number	

Prop. No.	Code	Qty	Property Type	Property Subtype	Event Association		Current Status		NCIC Number
Make			Model		Primary Color	Serial Number		Owner Applied Number	

Prop. No.	Code	Qty	Property Type	Property Subtype	Event Association		Current Status		NCIC Number
Make			Model		Primary Color	Serial Number		Owner Applied Number	

Weather Conditions at the Time of Offense	Disposition of Property
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VEHICLE INFORMATION

Status	Year	Make	Model	Body Style	
Market Value	N.C.I.C. Number		Vehicle Color 1	Vehicle Color 2	Interior Color
Special Vehicle Features					
Additional Vehicle Description					

The above noted Complainant reported a AGG ASSAULT W/DEADLY WEAPON at 4928 SAMUELL BLVD

Reporting party believes that the Incident occurred on 07122016 at about 1521 hours by:

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MESQUITE POLICE DEPARTMENT - INCIDENT REPORT

Incident Summary:

Incident Number:		ORI Number:		Report Type: OFFENSE/INCIDENT REPORT	
Incident Type: 32P					
Incident/Offense Location: 4928 SAMUELL BLVD				Building No:	County: DALLAS
Premise Type: NON-RESIDENCE				Sector: SOU	Beat: 31
Incident Occurred Date (Start): 07122016	Time: 1521	Incident Occurred Date (End):	Time:	Report Taken: 07122016	Time: 1835
Domestic:	Bias Motivation:	Gang Related:	Substance:	Senior Involved:	
Contact Nature:				Reported Date: 07122016	Time: 1800
Offense Description: AGG ASSAULT W/DEADLY WEAPON			Statute Number: PC 22.02(a)(2)	Statute Code: 13150005	Classification: FELONY - 2ND DEGREE
Reporting Officer: Huynh, Huy-Trinh 0902			Supervisor Approving: Huynh, Huy-Trinh 0902		
Assisting Officer:		Assisting Officer:		Assisting Officer:	
Case Status: PENDING		Disposition: PENDING		Disposition Date:	

Victim Summary:

Person No: V1	MNI:	Event Association: V	Victim Type: I	Contact Date: 07122016	Time:
Name:		Alias:			Prefix:
Infant Type:		Sex: MALE	Race: OTHER	Ethnicity:	Juvenile:
Victim/Suspect Relationship:				Susp Person No:	
Building No:				County:	
Phone Type:		Phone Number:		Ext:	
DL State:	DL Number:	Exp Date:	Occupation:	Employer:	
Address 2:				Building No:	County:
SMTI Code:		SMTI Description:			
SMTI Code:		SMTI Description:			
SMTI Code:		SMTI Description:			
SMTI Code:		SMTI Description:			
Means of Attack:		Agg Assault/Homicide:			
Transported To:		Transported By:			
Victim to Offense (1):		Victim to Offense (2):		Victim to Offense (3):	
LEOKA(1):		LEOKA(2):		LEOKA(3):	
LEOKA Type Weapon:					

Business Information:

Connected to Incident as :			
Business Name:		Business Type:	
Address:		Building No:	County:
Business Phone:	Victim Type:	Bus Offense (1):	Bus Offense (2):

CAD Information:

Caller Name:		Caller Location: CONCENTRA MEDICAL			
Caller Address: 4928 SAMUELL BLVD				Building No:	County:
Phone Type:	Phone Number:	Ext:	Phone Type:	Phone Number:	Ext:
Date Dispatched: 07122016	Time: 1544	Date Arrived: 07122016	Time:	Geo Code:	Local Geo Code:

MESQUITE POLICE DEPARTMENT - PERSONS SUMMARY

Incident Number: LPD160712070185	Incident Type: 32P
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Person No: S1

MNI:	Event Association: S	Victim Type: I	Contact Date:	Time:
Name:	Alias:	Prefix:		
[REDACTED]	Age (Range): 60 60	Infant Type:	Sex: M	Race: W
	Hair Color: BROWN	Victim/Suspect Relationship:	Ethnicity: NOT HISPANIC OR LATINO	
	Building No:	County:		Juvenile: NO
	Ext:	Phone Type:	Phone Number:	Ext:
DL State:	DL Number:	Exp Date:	Occupation: SELF EMPLOYED	Employer:
Address 2:			Building No:	County:
SMTI Code:	SMTI Description:			
SMTI Code:	SMTI Description:			
SMTI Code:	SMTI Description:			
SMTI Code:	SMTI Description:			
Means of Attack:		Agg Assault/Homicide:		
Transported To:		Transported By:		
Victim to Offense (1):		Victim to Offense (2):		Victim to Offense (3):
Victim to Offense (4):				
LEOKA(1):	LEOKA(2):	LEOKA(3):	LEOKA Type Weapon:	

Person No: W1

MNI:	Event Association: S	Victim Type: I	Contact Date:	Time:
Name:	Alias:	Prefix:		
[REDACTED]	Age (Range): 58 58	Infant Type:	Sex: F	Race: W
	Hair Color: GRAY / PARTIAL GRAY	Victim/Suspect Relationship:	Ethnicity: NOT HISPANIC OR LATINO	
	Building No:	County:		Juvenile: NO
	Ext:	Phone Type:	Phone Number:	Ext:
DL State:	DL Number:	Exp Date:	Occupation: MED ADMIN ASST	Employer:
Address 2:			Building No:	County:
SMTI Code:	SMTI Description:			
SMTI Code:	SMTI Description:			
SMTI Code:	SMTI Description:			
SMTI Code:	SMTI Description:			
Means of Attack:		Agg Assault/Homicide:		
Transported To:		Transported By:		
Victim to Offense (1):		Victim to Offense (2):		Victim to Offense (3):
Victim to Offense (4):				
LEOKA(1):	LEOKA(2):	LEOKA(3):	LEOKA Type Weapon:	

MESQUITE POLICE DEPARTMENT - PERSONS SUMMARY

Incident Number: [REDACTED]	Incident Type: 32P
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Person No: W2

MNI:		Event Association: WI		Victim Type: I		Contact Date:		Time:	
Name: [REDACTED]				Alias:				Prefix:	
Infant Type:		Sex: MALE		Race: BLACK		Ethnicity:		Juvenile:	
Victim/Suspect Relationship:						Susp Person No:			
Building No:						County:			
Phone Type: OTHER CONTACT NUMBER				Phone Number: [REDACTED]		Ext:			
DL State:		DL Number:		Exp Date:		Occupation:		Employer:	
Address 2:						Building No:		County:	
SMTI Code:		SMTI Description:							
SMTI Code:		SMTI Description:							
SMTI Code:		SMTI Description:							
SMTI Code:		SMTI Description:							
Means of Attack:				Agg Assault/Homicide:					
Transported To:				Transported By:					
Victim to Offense (1):		Victim to Offense (2):		Victim to Offense (3):		Victim to Offense (4):			
LEOKA(1):		LEOKA(2):		LEOKA(3):		LEOKA Type Weapon:			

Person No:

MNI:		Event Association:		Victim Type:		Contact Date:		Time:	
Name:				Alias:				Prefix:	
Social Security No:		Date of Birth:		Age (Range):		Infant Type:		Sex:	
Race:		Ethnicity:		Juvenile:		Victim/Suspect Relationship:		Susp Person No:	
Height (Range):		Weight (Range):		Eye Color:		Hair Color:		Building No:	
County:		Phone Type:		Phone Number:		Ext:		Phone Type:	
Phone Number:		Ext:		Phone Type:		Phone Number:		Ext:	
DL State:		DL Number:		Exp Date:		Occupation:		Employer:	
Address 2:						Building No:		County:	
SMTI Code:		SMTI Description:							
SMTI Code:		SMTI Description:							
SMTI Code:		SMTI Description:							
SMTI Code:		SMTI Description:							
Means of Attack:				Agg Assault/Homicide:					
Transported To:				Transported By:					
Victim to Offense (1):		Victim to Offense (2):		Victim to Offense (3):		Victim to Offense (4):			
LEOKA(1):		LEOKA(2):		LEOKA(3):		LEOKA Type Weapon:			

MESQUITE POLICE DEPARTMENT - VEHICLE SUMMARY

Incident Number:				Incident Type: 32P					
Vehicle No:		Event Association:		Vehicle Status:		Veh. Status Date:	Status Time:	Value:	
Vehicle Type:	Veh Year:	Make:		Model:		Style:			
VIN:		License Number:	Lic State:	Exp. Date:	Primary Color:	Secondary Color:		Interior Color:	
NCIC Date:	NCIC Number:		NCIC Entered by:		NCIC Cancel Date:				
Registered Owner:							Phone:		
Owner Address:									
Vehicle Features (1):			Vehicle Features(2):			Vehicle Features(3):			
Vehicle Features (4):			Vehicle Features(5):			Vehicle Features(6):			
Vehicle Features (7):			Vehicle Features(8):			Vehicle Features(9):			
Recovery Location:						Recovery Date:	Time:	Value:	Description:
Recovered/Impounded by Officer:					Submit as Evidence:				
Current Location:						Vehicle Abandoned:		Tag No:	
Submitted by:				Submitted Date:		Submitted Time:			

Vehicle No:		Event Association:		Vehicle Status:		Veh. Status Date:	Status Time:	Value:	
Vehicle Type:	Veh Year:	Make:		Model:		Style:			
VIN:		License Number:	Lic State:	Exp. Date:	Primary Color:	Secondary Color:		Interior Color:	
NCIC Date:	NCIC Number:		NCIC Entered by:		NCIC Cancel Date:				
Registered Owner:							Phone:		
Owner Address:									
Vehicle Features (1):			Vehicle Features(2):			Vehicle Features(3):			
Vehicle Features (4):			Vehicle Features(5):			Vehicle Features(6):			
Vehicle Features (7):			Vehicle Features(8):			Vehicle Features(9):			
Recovery Location:						Recovery Date:	Time:	Value:	Description:
Recovered/Impounded by Officer:					Submit as Evidence:				
Current Location:						Vehicle Abandoned:		Tag No:	
Submitted by:				Submitted Date:		Submitted Time:			

Vehicle No:		Event Association:		Vehicle Status:		Veh. Status Date:	Status Time:	Value:	
Vehicle Type:	Veh Year:	Make:		Model:		Style:			
VIN:		License Number:	Lic State:	Exp. Date:	Primary Color:	Secondary Color:		Interior Color:	
NCIC Date:	NCIC Number:		NCIC Entered by:		NCIC Cancel Date:				
Registered Owner:							Phone:		
Owner Address:									
Vehicle Features (1):			Vehicle Features(2):			Vehicle Features(3):			
Vehicle Features (4):			Vehicle Features(5):			Vehicle Features(6):			
Vehicle Features (7):			Vehicle Features(8):			Vehicle Features(9):			
Recovery Location:						Recovery Date:	Time:	Value:	Description:
Recovered/Impounded by Officer:					Submit as Evidence:				
Current Location:						Vehicle Abandoned:		Tag No:	
Submitted by:				Submitted Date:		Submitted Time:			